

P15000021593

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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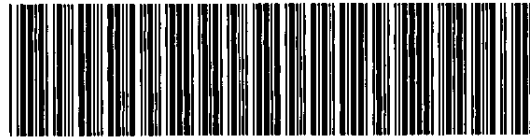
(Business Entity Name)

(Document Number)

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DIVISION OF CORPORATIONS  
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**TRANSMITTAL LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** **FIFTH SIXTEEN CORP.**  
(Name of Corporation)

**DOCUMENT NUMBER:** **P15000021593**

The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

**PEREZ MILLAN, MARIA JOSE**  
(Name of Person)

**FIFTH SIXTEEN CORP.**  
(Name of Firm/Company)

**1390 Brickell Ave Ste 200**  
(Address)

**Miami, FL 33131**  
(City/State and Zip Code)

For further information concerning this matter, please call:

**Martin Mas** at ( **305** ) **951-0821**  
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for \$35.00 made payable to the Florida Department of State.

**Mailing Address:**  
Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**  
Amendment Section  
Division of Corporations  
2661 Executive Center Circle  
Tallahassee, FL 32301

**OFFICER / ~~3333~~ DIRECTOR RESIGNATION  
FOR A CORPORATION**

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SECRETARY OF STATE  
DIVISION OF CORPORATIONS

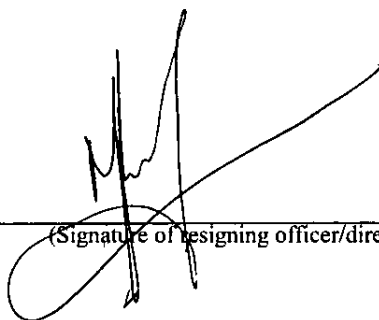
15 NOV -9 PM 12:45

I, PEREZ MILLAN, MARIA JOSE, hereby resign as Director  
(Title)

of FIFTH SIXTEEN CORP.  
(Name of Corporation)

P15000021593, a corporation organized under the laws of the State of  
(Document Number, if known)

Florida

  
(Signature of resigning officer/director)

**FILING FEE IS \$35.00**

**Make checks payable to Florida Department of State and mail to:**

Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314